## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s); to: Mail Mail Stop ISSUE FEE
Commissioner for Pate

o: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

JAN 1 1 2007 8

INSTRUCTIONS: This appropriate. All further indicated unless corrected maintenance fee notifica	form stould be used for corresponding including the delay or directed out tions.	or transmitting the ISSU ng the Patent, advance of nerwise in Block 1, by (a	JE FEE and PUBLICATI rders and notification of na) specifying a new corres	ON FEE (if required). Enaintenance fees will be pondence address; and/or	Blocks 1 through 5 sl mailed to the current (b) indicating a sepa	hould be completed where correspondence address as trate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fcc(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
-	7590 10/11 RBISON PLLC AIRFAX STREET	/2006	I he State addr	Certificate Teby certify that this Fee(s	of Mailing or Trans 3) Transmittal is being ficient postage for firs ISSUE FEE address	g deposited with the United st class mail in an envelope above, or being facsimile	
ALEXANDRIA	, VA 22314			(Depositor's name)			
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
10/629,858	10/629,858 07/30/2003		Daniel C. Carter	Daniel C. Carter P07634US01/BAS		S 6153	
FITLE OF INVENTION: COUMARIN ANALOG COMPOUNDS FOR SAFER ANTICOAGULANT TREATMENT2007 HTMAZ12   600000029 18523000							
				01 FC:2501 02 FC:1504		760.60 U2 353.60 G/	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700	. \$300	\$0	\$1000	01/11/2007	
EXAMINER ART UNIT			CLASS-SUBCLASS			•	
DENTZ, BERNARD I 1625			514-457000	•			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
B. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
New Century Pharmaceuticals, Inc. Huntsville, Alabama							
Please check the appropriate assignce category or categories (will not be printed on the patent):							
4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  XI Issue Fee A check is enclosed.  XI Payment by credit card. Form PTO-2038 is attached.  XI The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 2-0555 (enclose an extra copy of this form).							
a. Applicant claim	tus (from status indicates s SMALL ENTITY statu	d above) is. See 37 CFR 1.27.	☐ b. Applicant is no long	ger claiming SMALL ENT	ΓΙΤΥ status. Sec 37 Cl	FR 1.27(g)(2).	
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.							
Authorized Signature Date January 11, 2007							
Typed or printed name B. Aaron Schulman Registration No. 31,877							

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.